

# **PART B - FEE(S) TRANSMITTAL**

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003897 7590 07/26/2004

**SCHNECK & SCHNECK  
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<b>Merle P. Garcia</b>	(Depositor's name)
<i>Merle P. Garcia</i>	(Signature)
<b>October 25, 2004</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/650,346	08/27/2003	Robert P. Kittell	ETC-002	6678

**TITLE OF INVENTION: RANGE PREDICTION IN FLEET MANAGEMENT OF ELECTRIC AND FUEL-CELL VEHICLES**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	<del>\$665</del> 685	\$300	<del>\$965</del> 985	10/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS	10/28/2004 BABRAHA2 00000070 10650346
MANCHO, RONNIE M	3663	701-022000 01 FC:2501 02 FC:1504	685.00 OP 300.00 OP 30.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page:  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Schneck & Schneck**  
 2 **Thomas Schneck**  
 3 .....

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Michael M. Schneck**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Granite Bay, California**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☒ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
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☒ Advance Order - # of Copies 10

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☒ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0590 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature) *Thomas Schneck* (Date) **October 25, 2004**

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